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Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
Northern District of: Illinois (State)	
Case number (if known)	Chapter you are filing under:
	Chapter 7 Chapter 11
	Chapter 12 Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	art 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name	Divida	
	Write the name that is on	First name	First name
	your government-issued picture identification (for	Middle name	Middle name
	example, your driver's license or passport	Edmondson Last name	Last name
	Bring your picture	Zast name	
	identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you		
	have used in the last 8 years	First name	First name
	Include your married or	Middle name	Middle name
	maiden names.	Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
3.	Only the last 4 digits of your Social	XXX - XX- 9050	xxx - xx-
	Security number or federal Individual	OR	OR
	Taxpayer Identification number (ITIN)	9 xx - xx-	9 xx - xx-

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Debtor 1 Divida First Name	Middle Name	Edmonds on Last Name	_ Case number (if k	(nown)	
	About Debtor 1:		About Debt	tor 2 (Spouse Only in	a Joint Case):
4. Any business names and Employer	✓ I have not used any busin	ness names or EINs.	I have no	ot used any business nar	mes or EINs.
Identification Numbers (EIN) you have used in the last	Business name		Business na	ame	
8 years	Business name		Business na	ame	
Include trade names and doing business as names	EIN		EIN		
	EIN		EIN		
5. Where you live	401 W. 99th St.		If Debtor 2 I	lives at a different addre	ess:
	Number Street		Number	Street	
	Chicago Illinois City State	60628 Zip Code	City	State	Zip Code
	Cook				·
	County If your mailing address is above, fill it in here. Note the notices to you at this mailing a	hat the court will send any		s mailing address is di s. Note that the court will ddress.	
	Number Street		Number	Street	
	City State	Zip Code	City	State	Zip Code
6. Why you are choosing this district	Check one:		Check one:		
to file for bankruptcy		efore filing this petition, I have r than in any other district.		e last 180 days before filin this district longer than in	
	I have another reason. Ex	xplain. (See 28 U.S.C. §§ 1408.)	I have ar	nother reason. Explain. (S	See 28 U.S.C. §§ 1408.)

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De	ebtor 1 Divida	Edmondson Case number (if known)
	First Name	Middle Name Last Name
Pa	rt 2: Tell the Court Abo	ut Your Bankruptcy Case
7.	The chapter of the Bankruptcy Code you are choosing to file under	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form B2010)). Also, go to the top of page 1 and check the appropriate box. Chapter 7 Chapter 11 Chapter 12 Chapter 13
8.	How you will pay the fee	 ✓ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. ☐ I need to pay the fee in installments. If you choose this option, sign and attach the <i>Application for Individuals to Pay Your Filing Fee in Installments</i> (Official Form 103A). ☐ I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the <i>Application to Have the Chapter 7 Filing Fee Waived</i> (Official Form 103B) and file it with your petition.
9.	Have you filed for bankruptcy within the last 8 years?	No. Yes. District Northern District of Illinois When MM / DD / YYYY Case number (Case number MM / DD / YYYYY) 13-bk-05255 District When MM / DD / YYYYY Case number (Case number MM / DD / YYYYY) Case number (Case number MM / DD / YYYYY)
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	✓ No. Yes. Debtor Relationship to you District When MM / DD / YYYY Debtor Relationship to you District When MM / DD / YYYYY Case number, if known MM / DD / YYYYY Case number, if known MM / DD / YYYYY
11.	Do you rent your residence?	 No. Go to line 12. ✓ Yes. Has your landlord obtained an eviction judgment against you? ✓ No. Go to line 12. ☐ Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> (Form 101A) and file it with this bankruptcy petition.

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Edmondson Debtor 1 Divida __ Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. V For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have **V** No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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Debtor 1 Divida Edmondson Case number (if known)
First Name Middle Name Last Name

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan. Attach a copy of the certificate and the payment plan. The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you are not eligible to file. I certify that I asked for credit counseling services I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. My physical disability causes me to Disability. My physical disability causes me to Disability. be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

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Debtor 1 Divida Edmondson Case number (if known) Middle Name First Name Last Name Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as 16. What kind of debts do incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded No. and administrative expenses are paid that Yes. funds will be available for distribution to unsecured creditors? **7** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 50-99 5,001-10,000 50,001-100,000 do you estimate that 100-199 10,001-25,000 More than 100,000 you owe? 200-999 \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your liabilities to be? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X X /s/ Divida Edmondson Signature of Debtor 1 Signature of Debtor 2 Executed on _ 1/24/2018 Executed on MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Divida		Edmondson	Case number (it	fknown)
First Name	Middle Name	Last Name		
For your attorney, if you are represented by one	eligibility to proceed und	der Chapter 7, 11, 12, or	13 of title 11, Unite	nave informed the debtor(s) about od States Code, and have explained the also certify that I have delivered to the
If you are not	debtor(s) the notice requ	ired by 11 U.S.C. § 342(I	o) and, in a case in	which § 707(b)(4)(D) applies, certify that I
represented by an				dules filed with the petition is incorrect.
attorney, you do not	_	an inquiry that the inner		and the transfer of the second
need to file this page.	/s/ Alicia Haro		Date	1/24/2018
	Signature of Attorney f	or Debtor		MM / DD / YYYY
	Signature of Attorney 1	or Debtor		
	Alicia Haro			
	Printed name			
	Semrad Law Firm			
	Firm name			
	11101 S. Western Ave	enue		
	Street			
	Chicago		nois	60643
	City	St	ate	Zip Code
	0			
	Contact phone		Email address	aharo@semradlaw.com
	Bar number		State	

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Fill in this infor	mation to identify your ca	ase:	
Debtor 1	Divida		Edmondson
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court for the:	Northern	District of Illinois
			(State)
Case number (If known)			

Check if this is an
amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	Your assets Value of what you own
. Schedule A/B: Property (Official Form 106A/B)	\$0.00
1a. Copy line 55, Total real estate, from Schedule A/B	
1b. Copy line 62, Total personal property, from Schedule A/B	\$1,200.00
1c. Copy line 63, Total of all property on Schedule A/B	\$1,200.00
art 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	\$0.00
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	
. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$0.00
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$56,535.00
	\$56,535.00
Your total liabilities	
Your total liabilities Part 3: Summarize Your Income and Expenses	
Part 3: Summarize Your Income and Expenses	
art 3: Summarize Your Income and Expenses	\$2,636.88
Part 3: Summarize Your Income and Expenses 4. Schedule I: Your Income (Official Form 106I)	\$2,636.88

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Deb	tor 1 Divida		Edmondson	Case number (if known)	
	First Name	Middle Name	Last Name		
Part 4	4: Answer These Que	stions for Administrati	ive and Statistical Record	S	
6. A	re you filing for bankrupto	under Chapters 7, 11, or	13?		
Г	No. You have nothing to	report on this part of the for	rm. Check this box and submit t	this form to the court with your other sch	nedules.
	Yes.			•	
Ľ	<u>Z</u> 100.				
7. W	hat kind of debt do you ha	ve?			
Ŀ				an individual primarily for a personal,	
		• , ,	ill out lines 8-10 for statistical pu		
	Your debts are not prin this form to the court with		u have nothing to report on this	part of the form. Check this box and su	bmit
	From the <i>Statement of You</i> Form 122A-1 Line 11; OR , F		e: Copy your total current month rm 122C-1 Line 14.	nly income from Official	\$3,283.50
9.	Copy the following enecia	Lostogorios of claims fro	m Part 4, line 6 of Schedule E	/E-	
3.	Copy the following specia	r categories of claims not	III Fait 4, lille 0 of Schedule L		
	From Part 4 on Schedule	E/F, copy the following:		Total claim	
	9a. Domestic support obliga	ations (Copy line 6a.)		\$0.00	
	9b. Taxes and certain other	debts you owe the governn	nent (Copy line 6b.)	\$0.00	
		,	, , , ,	\$0.00	
	9c. Claims for death or pers	orial injury wrille you were in	moxicated. (Copy line 6c.)	417.000.00	
	9d. Student loans. (Copy lin	ie 6f.)		\$17,000.00	
			r divorce that you did not report	as \$0.00	
	priority claims. (Copy line 6	g.)			
	9f. Debts to pension or pro-	it-sharing plans, and other s	similar debts. (Copy line 6h.)	\$0.00	

\$17,000.00

9g. Total. Add lines 9a through 9f.

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Fill in this	information to identify you	r case:	-		
Dalatand	D: 14		Educadore		
Debtor 1	Divida First Name	Middle Na	Edmondson Last Name		
Debtor 2	Thot Hamo	Wildio W	and East Name		
(Spouse, if fil	ing) First Name	Middle Na	ame Last Name		
United Sta	ates Bankruptcy Court for th	e: Northern	District of Illinois (State)		
Case num (If known)	ber				
Officia	I Form 106A/B				Check if this is an amended filing
Sched	dule A/B: Prop	erty			12/1
category v responsibl write your	where you think it fits bes e for supplying correct in name and case number (t. Be as complete ar formation. If more sp if known). Answer ev	st an asset only once. If an asset fits in mond accurate as possible. If two married per pace is needed, attach a separate sheet to rery question. Ind, or Other Real Estate You Own or	ople are filing together, both a o this form. On the top of any a	re equally
	No. Go to Part 2	equitable interest ii	n any residence, building, land, or similar	property?	
<u> </u>		_			
ш	Yes. Where is the property	?			
			What is the property? Check all that apply.		claims or exemptions. Put red claims on <i>Schedule D:</i>
1.1	Street address, if available,	or other description	Single-family home		nims Secured by Property.
		•	Duplex or multi-unit building	Current value of the	Current value of the
			Condominium or cooperative	entire property?	portion you own?
			Manufactured or mobile home		
	Number Street		Land Investment property	Describe the nature o	f your ownership
			Timeshare	interest (such as fee s	simple, tenancy by
	City State	Zip Code	Other	the entireties, or a life	e estate), if Known.
			Who has an interest in the property? Che		mmunity property
			one.		
			Debtor 1 only		
			Debtor 2 only		
			Debtor 1 and Debtor 2 only At least one of the debtors and another		
			Other information you wish to add about property identification number:	this item, such as local	
If you	own or have more than one	e, list here:	<u> </u>		
			What is the property? Check all that apply.		claims or exemptions. Put
1.2	Street address, if available,	or other description	Single-family home		red claims on Schedule D: nims Secured by Property.
	Street address, if available,	or other description	Duplex or multi-unit building		
			Condominium or cooperative	Current value of the entire property?	Current value of the portion you own?
			Manufactured or mobile home		<u> </u>
	Number Street		Land	Describe the nature o	f vour ownership
			Investment property	interest (such as fee s	simple, tenancy by
	City State	Zip Code	Timeshare Other	the entireties, or a life	e estate), if known.
	•	·		Chack if this is co	mmunity property
			Who has an interest in the property? Che one.		minumity property
			Debtor 1 only		
			Debtor 2 only		
			Debtor 1 and Debtor 2 only		
			At least one of the debtors and another		
			Other information you wish to add about property identification number:	this item, such as local	

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Street address, if available, or other description Single-family home	Debtor 1	Divida	Edmondson Case no	ımber (if known)
Street address, if available, or other description		First Name Middle Name	e Last Name	
Number Street Investment property Timeshare Time		et address, if available, or other description	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	
Who has an interest in the property? Check one. (see instructions) Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 and another Other information; Debtor 1 and Debtor 2 only Describe Your Vehicles Other information: Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 one. Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 one. Debtor 6 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only D			Investment property Timeshare	Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.
2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here. Describe Your Vehicles			Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this in	
Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles No	2 444	the dellar value of the portion you own f		ntrice for pages
Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles Void Yes		• •		
3.1 Make Model: Year: Approximate mileage: Other information: 3.2 Make Model: Year: Approximate mileage: Other information: 3.3 Make Model: Year: Approximate mileage: Other information: 3.4 Make Model: Year: Approximate mileage: Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) 3.2 Make Model: Year: Approximate mileage: Do not deduct secured claims or exemption the amount of any secured by Proportion you own Current value of the entire property? Do not deduct secured claims or exemption the amount of any secured claims or exemption the entire property? Current value of the entire property? Current value of the entire property?	Do you ow you own th 3. Cars, val	rn, lease, or have legal or equitable internat someone else drives. If you lease a vehicens, trucks, tractors, sport utility vehicles, mo	cle, also report it on Schedule G: Executory Contracts	
Other information: Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Make Model: Year: Approximate mileage: Other information: Debtor 1 and Debtor 2 only Current value of the entire property? Do not deduct secured claims or exemption the amount of any secured claims on Scheepers (Creditors Who Have Claims Secured by Property) Current value of the entire property?	ш	Make	one.	Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D:</i> <i>Creditors Who Have Claims Secured by Property.</i>
instructions) 3.2 Make Model: Year: Approximate mileage: Other information: Who has an interest in the property? Check one. Do not deduct secured claims or exemption the amount of any secured claims on Scheet Creditors Who Have Claims Secured by Property? Current value of the entire property? Current value of the entire property? Debtor 1 and Debtor 2 only		··· <u> </u>	Debtor 1 and Debtor 2 only	
3.2 Make Model: Year: Approximate mileage: Other information: Who has an interest in the property? Check one. Do not deduct secured claims or exemption the amount of any secured claims or exemption the amount of any secured claims or exemption. Creditors Who Have Claims Secured by Property? Current value of the entire property? Current value of the entire property?				ее
Other information: Debtor 1 and Debtor 2 only Current value of the current value of the portion you own	3.2	Model: Year:	Who has an interest in the property? Checone.	Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D:</i> <i>Creditors Who Have Claims Secured by Property.</i>
Check if this is community property (see instructions)			Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (s	entire property? portion you own?

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otor i	Divida First Name	Middle Name	Edmondson Last Name	Case numb	er (it known)	
3.3	Make Model: Year: Approximate mileage:		Who has an interest in the one. Debtor 1 only Debtor 2 only	property? Check	Do not deduct secured the amount of any secu- Creditors Who Have Cla Current value of the	•
	Other information:		Debtor 1 and Debtor 2 on	nly	entire property?	portion you own?
			At least one of the debtor	s and another		
			Check if this is commur instructions)	nity property (see		
3.4	Make		Who has an interest in the	property? Check	Do not deduct secured	
	Model:		one.		the amount of any secu	ured claims on <i>Schedule</i> aims Secured by Propert
	Year: Approximate mileage:		Debtor 1 only		Creditors vino riave Cia	ums secured by Fropen
			Debtor 2 only		Current value of the entire property?	Current value of the portion you own?
	Other information:		Debtor 1 and Debtor 2 on	-	——————	portion you own:
			At least one of the debtor			
			Check if this is commur	nity property (see		
Exar		•	er recreational vehicles, other t, fishing vessels, snowmobiles, r	•		
Exar	nples: Boats, trailers, motors No Yes	•		motorcycle accessor		· ·
Exar	nples: Boats, trailers, motors No Yes Make Model: Year:	•	t, fishing vessels, snowmobiles, r	motorcycle accessor	Do not deduct secured	red claims on <i>Schedule</i>
Exar	nples: Boats, trailers, motors No Yes Make Model:	•	t, fishing vessels, snowmobiles, r Who has an interest in the one.	motorcycle accessor	Do not deduct secured the amount of any secu Creditors Who Have Cla	red claims on Schedule ims Secured by Propert Current value of the
Exar	nples: Boats, trailers, motors No Yes Make Model: Year:	•	who has an interest in the one. Debtor 1 only	motorcycle accessor property? Check	Do not deduct secured the amount of any secu Creditors Who Have Cla	red claims on Schedule aims Secured by Propert
Exar	nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage:	•	who has an interest in the one. Debtor 1 only Debtor 2 only	motorcycle accessor property? Check	Do not deduct secured the amount of any secu Creditors Who Have Cla	rred claims on Schedule aims Secured by Propert Current value of the
Exar	nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage:	•	who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on	motorcycle accessor property? Check hly s and another	Do not deduct secured the amount of any secu Creditors Who Have Cla	red claims on Schedule ims Secured by Propert Current value of the
4.1	nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information:	•	Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtor. Check if this is communinstructions) Who has an interest in the	property? Check bly s and another hity property (see	Do not deduct secured the amount of any secu Creditors Who Have Claterent value of the entire property?	red claims on Schedule aims Secured by Propert Current value of the portion you own? claims or exemptions. F
4.1	nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model:	•	who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtor instructions) Who has an interest in the one.	property? Check bly s and another hity property (see	Do not deduct secured the amount of any secuce Creditors Who Have Classes Current value of the entire property? Do not deduct secured the amount of any secu	claims or Schedule of the portion you own?
4.1	Make Model: Approximate mileage: Other information: Make Model: Year: Approximate mileage: Other information:	•	Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtor instructions) Who has an interest in the one. Debtor 1 only	property? Check bly s and another hity property (see	Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Classifications	red claims on Schedule ims Secured by Propent Current value of the portion you own? claims or exemptions. If the claims on Schedule ims Secured by Propentities.
4.1	mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage:	•	Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtor instructions) Who has an interest in the one. Debtor 1 only Debtor 2 only	property? Check hly s and another hity property (see property? Check	Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the	red claims on Schedule ims Secured by Propert Current value of the portion you own? claims or exemptions. For the portion of
4.1	Make Model: Approximate mileage: Other information: Make Model: Year: Approximate mileage: Other information:	•	who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtor. Check if this is communinstructions) Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only	property? Check hly s and another hity property (see property? Check	Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Classifications	red claims on Schedule ims Secured by Propert Current value of the portion you own? claims or exemptions. Fured claims on Schedule ims Secured by Propert
4.1	mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage:	•	Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtor instructions) Who has an interest in the one. Debtor 1 only Debtor 2 only	property? Check The property of the color o	Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the	red claims on Schedule ims Secured by Propert Current value of the portion you own? claims or exemptions. For the portion of

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Debtor 1 Divida Edmondson Case number (if known) Middle Name First Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Couch, Bed \$100.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... TV, Cell Phone, Laptop, Tablet \$250.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections, other collections, memorabilia, collectibles Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... **Used Clothing** \$100.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... 13. Non-farm animals Examples: Dogs, cats, birds, horses Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$450.00 for Part 3. Write that number here

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Debtor 1 Divida Edmondson Case number (if known) Middle Name First Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: 17.1. Checking account: 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: Netspend Prepaid Account \$750.00 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts **✓** No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No % of ownership: Name of entity Yes. Give specific information about

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Debt	tor 1 Divida		Edmondson	Case number (if known)	
	First Name	Middle Name	Last Name		
20.	Negotiable instruments	orate bonds and other negotials include personal checks, cashiers ents are those you cannot transfer a lssuer name:	checks, promissory note	s, and money orders.	
21.	Retirement or pension Examples: Interests in If		. thrift savings accounts.	or other pension or profit-sharing plans	
	No No		, and carnings accounts,	or care. porteion or prom channy plane	
	Yes. List each	Type of account:	Institution name:		
	account	401(k) or similar plan:			
	separately.	Pension plan:			
		•			
		IRA:			
		Retirement account:			
		Keogh:			
		Additional account:			
		Additional account:			
22.		prepayments d deposits you have made so that with landlords, prepaid rent, public			
	Yes	Electric:			
		Gas:			
		Heating oil:			
		Security deposit on rental unit:			
		Prepaid rent:			
		Telephone:			
		Water:			
		Rented furniture:			
		Other:			
23.	Annuities (A contract for	or a periodic payment of money to	you, either for life or for a	a number of years)	
	✓ No ☐ Yes	Issuer name and description:			

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Debt	or 1 <u>Divida</u> First Name	Edmondson Case number (if known)	
24.	Interests in a	an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition progra	m.
	26 U.S.C. §§	530(b)(1), 529A(b), and 529(b)(1).	
	✓ No Yes	Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):	
			
25.		table or future interests in property (other than anything listed in line 1), and rights or powers for your benefit	
	✓ No		
	Yes. Desc	cribe	
26.	Patents, cop		
		ternet domain names, websites, proceeds from royalties and licensing agreements	
	✓ No Yes. Desc	cribe	
27.		anchises, and other general intangibles	
	Examples: Bu No	uilding permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses	
	Yes. Desc	cribe	
Mor	ney or propei	rty owed to you?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	ney or propei		portion you own? Do not deduct secured
	Tax refunds o	owed to you	portion you own? Do not deduct secured claims or exemptions.
	Tax refunds or ✓ No — Yes. Give sabou	specific information ut them, including whether	portion you own? Do not deduct secured claims or exemptions.
	Tax refunds or No Yes. Give s about	specific information ut them, including whether already filed the returns the tax years	portion you own? Do not deduct secured claims or exemptions. \$0.00
	Tax refunds or No Yes. Give s about you a and t	specific information ut them, including whether already filed the returns the tax years	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds on No Yes. Give s about you a and t Family support Examples: Past	specific information ut them, including whether already filed the returns the tax years	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds or ✓ No Yes. Give sabout you a and fi Family support Examples: Past	specific information ut them, including whether already filed the returns the tax years Local: rt st due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settler	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds or ✓ No Yes. Give sabout you a and fi Family support Examples: Past	specific information ut them, including whether already filed the returns the tax years Local: rt st due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settler	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds or ✓ No Yes. Give sabout you a and fi Family support Examples: Past	specific information ut them, including whether already filed the returns the tax years	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds or ✓ No Yes. Give sabout you a and fi Family support Examples: Past	specific information ut them, including whether already filed the returns the tax years Int the due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settler specific information Alimony: Maintenance:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 entt \$0.00 \$0.00 \$0.00
28.	Tax refunds or ✓ No Yes. Give sabout you a and fi Family support Examples: Past	specific information ut them, including whether already filed the returns the tax years	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 enent \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	Tax refunds or ✓ No — Yes. Give s about you a and to Family support Examples: Past ✓ No — Yes. Give s Other amount	specific information ut them, including whether already filed the returns the tax years	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 enent \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	Tax refunds or ✓ No ✓ Yes. Give s about you a and to Family support Examples: Past ✓ No ☐ Yes. Give s Other amount Examples: Unp	specific information ut them, including whether already filed the returns the tax years Int st due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settler specific information	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 enent \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	Tax refunds on ✓ No ✓ Yes. Give s about you a and if Family suppor Examples: Past ✓ No ✓ Yes. Give s Other amount Examples: Unp	specific information ut them, including whether already filed the returns the tax years	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 enent \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	Tax refunds on No Yes. Give s about you a and t Family suppor Examples: Past No Yes. Give s Other amount Examples: Unp	specific information ut them, including whether already filed the returns the tax years	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 enent \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

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Deb	tor 1 Divida		Edmondson	Case number (if known)	
	First Name	Middle Name	Last Name		
21	Interests in insura	nnaa maliaina			
31.			alth savings account (HSA); credit, h	amagurayla ar rantarla inquranca	
	Examples: Health,	disability, or life insurance; ne	aith savings account (HSA); credit, n	omeowner's, or renter's insurance	
	✓ No				
	✓ No		Company name:	Beneficiary:	Surrender or refund value:
	Yes. Name the	insurance company	company name.	Borronolary.	Carronadi di Tolana Valad.
		and list its value			
	0. odo pooj				
32.	Any interest in pr	operty that is due you from	someone who has died		
	If you are the bene	ficiary of a living trust, expect	proceeds from a life insurance policy	y, or are currently entitled to receive	
	property because s			•	
	,				
	✓ No				
	Yes. Describe.				
	Tes. Describe.				
33	Claims against th	ird narties, whether or not	you have filed a lawsuit or made	a demand for navment	
55.			urance claims, or rights to sue	a demand for payment	
	Examples. Acciden	is, employment disputes, ins	urance claims, or rights to sue		
	.✓ No				
	✓ 140				
	Yes. Describe.				
l					
34.	-	and unliquidated claims o	f every nature, including counterd	claims of the debtor and rights	
	to set off claims				
	✓ No				
	Yes. Describe.				
	L Too. Booombo.				
	-	 -			
35.	Any financial asse	ets you did not already list			
	•	-			
	√ No				
	Voc Deceribe				
	Yes. Describe.	••			
		,			
36	Add the dollar va	lue of all of your entries fro	m Part 4, including any entries fo	r nages you have attached	
00.		-	g art 4, moraumg any entries to		\$750.00
	ior Part 4. Write t	nat number here			
Part	5. Describe Ar	v Rusiness-Related Pro	onerty You Own or Have an Ir	nterest In. List any real estate in Pa	rt 1
1 ait	o. Booon bo 7 a	ly Business Holateur I	pporty roa our or mate anni	nor oot iiii Elot ariy roar ootato iii r a	
37.	Do you own or ha	ve any legal or equitable ir	terest in any business-related pro	operty?	
					Current value of the
	No. Go to Part	: 6.			
	Yes. Go to line	. 38			portion you own?
	165. 00 10 11116	500.			Do not deduct secured claims
					or exemptions
38.	Accounts receiva	ble or commissions you alr	eady earned		
			-		
	✓ No				
	Yes. Describe.				
	_				
20	Office ===:	furnishings and seed to			
39.		, furnishings, and supplies		alitera mana talanda a talanda a talanda a	atomic to also to a
	Examples: Busines	s-related computers, softwar	e, modems, printers, copiers, fax ma	achines, rugs, telephones, desks, chairs, ele	ectronic devices
	□ No				
	✓ No				
	Yes. Describe.				
1					

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Deb	tor 1 Divida	Edmondson	Case number (if known)	
	First Name	Middle Name Last Name		
40.	Machinery, fixtures, equi	pment, supplies you use in business, and tools of your trade	•	
	✓ No			
	Yes. Describe			
				
41.	Inventory			
	✓ No			
	Yes. Describe			
				
42.	Interests in partnerships	or joint ventures		
	✓ No			
	Yes. Give specific	Name of entity:	% of ownership:	
	information about			
	them			
43.	Customer lists, mailing lis	ts, or other compilations		
	✓ No			
		ude personally identifiable information (as defined in 11 U.S.C. § 1	101(41A))?	
			, ,,	
	☐ No			
	Yes. Describe	·		
44.	Any business-related pro	perty you did not already list		
	✓ No			
	Yes. Give specific			
	information			_
				
				_
45 A	dd the dollar value of all d	of your entries from Part 5, including any entries for pages yo	ou have attached	1
		ere		
<u> </u>				
Part	If you own or have an inte	n- and Commercial Fishing-Related Property You Orerest in farmland, list it in Part 1.	wn or Have an Interest In.	
46.	Do you own or have any	legal or equitable interest in any farm- or commercial fishin	ng-related property?	
	No. Go to Part 7.			Current value of the
				portion you own?
	Yes. Go to line 47.			Do not deduct secured claims or exemptions
47	Farm animals			
.,.	Examples: Livestock, poul	try, farm-raised fish		
	.✓ No			
	Yes. Describe			
	L 100. Describe			

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Deb	tor 1 Divida First Name	Middle Name	Last Name	Case number (if known)	
40			Last Name		
48.	Crops-either growing of	or narvested			
	✓ No				
	Yes. Describe				
49	Farm and fishing equin	ment, implements, machinery, fixt	ures and tools of trade		
10.		o.t,p.oo.to,aoo.y,x	aroo, and toolo or trado		
	✓ No				
	Yes. Describe				
50.	Farm and fishing suppl	ies, chemicals, and feed			
	No No				
	Yes. Describe				
	List December				
51.	Any farm- and commer	cial fishing-related property you d	id not already list		
	✓ No				
	Yes. Describe				
	_				
				Г	
		of your entries from Part 6, includ		-	
lor Pa	art 6. Write that number	here			
Part	7 Describe All Pro	perty You Own or Have an Inte	erest in That You Did	Not List Above	
		erty of any kind you did not alread			
		s, country club membership	•		
	✓ No				l
	Yes. Give specific				
	information				
54. A	dd the dollar value of all	of your entries from Part 7. Write	that number here		>
Dout	List the Totals of	Each Part of this Form			
Part	bi List the Totals of	Each Part of this Form			
55. I	Part 1: Total real estate	, line 2			
56. լ	part 2 total vehicles, line	e 5		<u> </u>	
57. F	art 3: Total personal an	d household items, line 15	\$450.00		
58. F	Part 4: Total financial as	sets, line 36	\$750.00		
59.1	Part 5: Total business-re	elated property. line 45	<u> </u>	_	
			-	_	
		ishing-related property, line 52		<u> </u>	
61.1	Part 7: Total other prope	erty not listed, line 54		<u> </u>	
62.	Total personal property.	Add lines 56 through 61	\$1200.00		+ \$1200.00
				Copy personal property total	
					\$1200.00
63. T	otal of all property on S	chedule A/B. Add line 55 + line 62			

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		DC	current 1 age 20 of	12	
Fill in this infor	rmation to identify your c	ase:			
Debtor 1	Divida		Edmondson		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States I	Bankruptcy Court for the:	Northern	District of Illinois (State)		
(If known)	-				
Official	Form 106C			_	Check if this is an amended filing
Schedul	e C: The Prop	erty You Clain	n as Exempt		04/16
Be as comple	ete and accurate as pos	ssible. If two married p	eople are filing together, both	are equally responsible for so	upplying correct

information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pai	t 1: Identify the Property You Clain	n as Exempt		
1.	Which set of exemptions are you claiming. You are claiming state and federal recommendation. You are claiming federal exemption. For any property you list on Schedule Advanced.	nonbankruptcy exemps. 11 U.S.C. § 522(b)(2	otions. 11 U.S.C. § 522(b)(3)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
	Brief description: Other financial account, Netspend Prepaid Account Line from Schedule A/B: 17	\$750.00	\$750.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
	Brief description: Couch, Bed Line from Schedule A/B: 06	\$100.00	\$100.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
3.	✓ No	ery 3 years after that for a	375? cases filed on or after the date of adjustment.) vithin 1,215 days before you filed this case?	

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Debto			Edmondson Last Name	Case number (if known)	
Part 2	Additional Page				
li	rief description of the property and ne on Schedule A/B that lists this roperty	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemp	•	Specific laws that allow exemption
d L	rief escription: TV, Cell Phone, Laptop, Tablet ine from chedule A/B: 07	\$250.00		et value, up to any ory limit	735 ILCS 5/12-1001(b)
d L	escription: Used Clothing ine from Schedule A/B: 11	\$100.00		s100.00 set value, up to any ory limit	735 ILCS 5/12-1001(a)

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Fill in this info	ormation to identify your ca	ase:				
Debtor 1	Divida		Edmondson			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States	Bankruptcy Court for the:	Northern	District of Illinois			
			(State)			
Case number (If known)	r					
Official	Form 106D			_		Check if this is an amended filing
Sched	ule D: Credit	ors Who Ha	ve Claims Secur	ed by Prop	erty	12/15
more space i			e are filing together, both are eq nber the entries, and attach it to			
1. Do any	creditors have claims s	ecured by your proper	ty?			
✓ No	. Check this box and subr	nit this form to the court v	with your other schedules. You ha	ve nothing else to repo	ort on this form.	
Yes	s. Fill in all of the informatio	n below.				
Part 1: Lis	t All Secured Claims					
for each		ditor has a particular claim,	red claim, list the creditor separately list the other creditors in Part 2. As g to the creditor's name.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports	Column C Unsecured portion If any

this claim

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Fill i	n this infori	mation to identify your c	ase:					
Deb	tor 1	Divida First Name	Middle Name	Edmondson Last Name				
Deb	tor 2		······································	<u> </u>				
(Spo	use, if filing)	First Name	Middle Name	Last Name				
Unit	ed States B	ankruptcy Court for the:	Northern	_ District of Illinois (State)				
Cas (If kno	e number			. ,				
<u> </u>		orm 106E/F				Che	eck if this is ar	n amended filing
Sc	hedu	ıle E/F: Cre	editors Who	Have Unse	cured Claims			12/15
othe Form clain the e knov	r party to a n 106A/B) a ns that are entries in the vn).	any executory contracts and on Schedule G: Exe listed in Schedule D: C he boxes on the left. At	s or unexpired leases that cutory Contracts and Une Creditors Who Hold Claims	could result in a claim expired Leases (Official s Secured by Property.	ns and Part 2 for creditors wit . Also list executory contracts Form 106G). Do not include a f more space is needed, copy top of any additional pages, v	on <i>Sched</i> ny creditor the Part y	ule A/B: Prop rs with partia ou need, fill i	perty (Official ally secured it out, number
1.	-	editors have priority un Go to Part 2.	secured claims against y	ou?				
2.	listed, ider As much a Continuati	ntify what type of claim it as possible, list the claims ion Page of Part 1. If mor	is. If a claim has both priorit	y and nonpriority amoun ding to the creditor's nam particular claim, list the o		both priority	y and nonprio	rity amounts.
						Total	Priority	Nonpriority

claim

amount

amount

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Debtor 1 Divida Edmondson Case number (if known) Middle Name First Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. **✓** Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. **Total claim** ACCEPTANCE NOW 4.1 \$3,960.00 Last 4 digits of account number 2029 Nonpriority Creditor's Name When was the debt incurred? 1/2014 6288 Dawson Blvd Number Street As of the date you file, the claim is: Check all that apply. Contingent 30093 Norcross Georgia Unliquidated City Zip Code State Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify ___ 030 UnknownLoanType Is the claim subject to offset? **✓** No Yes **ASHRO** 4.2 \$187.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 10/2014 3650 Milwaukee St Number As of the date you file, the claim is: Check all that apply. Contingent 53714 Madison Wisconsin Unliquidated City Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify CreditCard Is the claim subject to offset? **✓** No Yes **ASPEN** 4.3 \$600.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. BOX 105374 When was the debt incurred? n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated ATLANTA Georgia 30348 Disputed Zip Code City State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only **|** Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify _ Payday Loan Is the claim subject to offset? No Yes

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Debtor 1 Divida Edmondson Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 \$1,500.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 105262 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 30348 Atlanta Georgia City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ____ Unpaid Bill Is the claim subject to offset? **✓** No Yes **CAPITALONE** \$229.00 7651 Last 4 digits of account number ___ Nonpriority Creditor's Name When was the debt incurred? 11/2016 c/o Pollack & Rosen, P.C Number Street As of the date you file, the claim is: Check all that apply. 1825 Barrett Lakes Blvd Suite 510 Contingent 30144 Georgia Kennesaw Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts CreditCard Other. Specify _ Is the claim subject to offset? **✓** No Yes Cash USA 4.6 \$400.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a 3183 Wilshire Blvd. #196-A23 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 90010 Los Angeles California City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar

✓ No Yes

Check if this claim relates to a community debt

Is the claim subject to offset?

debts

Other. Specify ___

Payday Loan

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Debtor 1 Divida Edmondson Case number (if known) Last Name

After listing any entries on this page, number them begi	inning with 4.5, followed by 4.6, and so forth.	Total claim			
CCS/CORTRUST BANK NA		\$364.00			
Nonpriority Creditor's Name PO BOX 7030	Last 4 digits of account number 0015 When was the debt incurred? 12/2016				
Number Street	As of the date you file, the claim is: Check all that apply.				
MITCHELL South Dakota 57301 City State Zip Code	Contingent Unliquidated				
Who incurred the debt? Check one.	Disputed				
Debtor 1 only	Type of NONPRIORITY unsecured claim:				
Debtor 2 only	Student loans				
Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
At least one of the debtors and another Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar				
Is the claim subject to offset?	debts Other. Specify CreditCard				
✓ No Yes					
Citibank Neppyiority Creditorio Neppy	Last 4 digits of account number	\$156.00			
Nonpriority Creditor's Name PO BOX 22828 Number Street	When was the debt incurred?n/a				
Number Sueet	As of the date you file, the claim is: Check all that apply.				
	Contingent				
ROCHESTER New York 14692	Unliquidated				
City State Zip Code	Disputed				
Who incurred the debt? Check one. Debtor 1 only	Type of NONPRIORITY unsecured claim:				
Debtor 2 only	Student loans				
Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts				
Check if this claim relates to a community debt Is the claim subject to offset?	Other. Specify NSF				
✓ No					
Yes					
City of Chicago - Parking and red Light Tickets Nonpriority Creditor's Name	Last 4 digits of account number	\$642.00			
Department of Revenue - PO Box 88292	When was the debt incurred?n/a				
Number Street	As of the date you file, the claim is: Check all that apply.				
	Contingent				
Chicago Illinois 60680	Unliquidated				
City State Zip Code	Disputed				
Who incurred the debt? Check one. Debtor 1 only	Type of NONPRIORITY unsecured claim:				
Debtor 2 only	Student loans				
Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts				
Check if this claim relates to a community debt	Other. Specify Parking & Red Light Tickets				
Is the claim subject to offset? No					

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Debtor 1 Divida Edmondson Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 CREDIT MANAGEMENT LP \$507.00 Last 4 digits of account number Nonpriority Creditor's Name 4200 INTÉRNATIONAL PKWY When was the debt incurred? 5/2017 Number Street As of the date you file, the claim is: Check all that apply. Contingent CARROLLTON Texas 75007 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? **|** ORIGINAL CREDITOR: COMCAST **✓** No Other. Specify **CABLE** Yes 4.11 **FEDLOAN** \$0.00 Last 4 digits of account number 0001 Nonpriority Creditor's Name POB 60610 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent HARRISBURG Pennsylvania 17106 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes FIRST PREMIER BANK 4.12 \$453.00 Last 4 digits of account number 7231 Nonpriority Creditor's Name Jefferson Capital Systems, LLC PO Box 7999 When was the debt incurred? 5/2014 Number As of the date you file, the claim is: Check all that apply. c/o Kelly Lukason Contingent 56302 Saint Cloud Minnesota Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify _ CreditCard Is the claim subject to offset?

No Yes

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Debtor 1 Divida Edmondson Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 Fox Hills Cash \$350.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 196 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Batesland South Dakota 57716 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ Payday Loan Is the claim subject to offset? **✓** No Yes Freedom Cash Lenders \$700.00 4.14 Last 4 digits of account number _ Nonpriority Creditor's Name n/a Po Box 637 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Lakeport California 95453 State Zip Code Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Payday loan Other. Specify __ Is the claim subject to offset? **✓** No Yes Illinois Masonic 4.15 \$400.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 836 W Wellington n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60657 Chicago Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify ___ Medical Bill Is the claim subject to offset? **✓** No

Yes

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Debtor 1 Divida Edmondson Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.16 \$20,000.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? Po Box 7346 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 19101 Philadelphia Pennsylvania City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Other. Specify ____ 1040 Taxes Is the claim subject to offset? **✓** No Yes 4.17 MONTEREY COL \$443.00 6467 Last 4 digits of account number ___ Nonpriority Creditor's Name 7/2017 4095 AVENIDA DE LA When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent **OCEANSIDE** 92056 California Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts 001 Collection; Collecting for Is the claim subject to offset? **✓** ORIGINAL CREDITOR: 12 **✓** No **EMPORIUM** Other, Specify Yes MyQuickWallet 4.18 \$400.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a P.O. Box 1146 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 57555 Mission South Dakota Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Payday loan Is the claim subject to offset? **✓** No

Yes

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Debtor 1 Divida Edmondson Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.19 PRESTIGE FINANCIAL SVC \$6,844.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 12/2013 1420 S 500 W Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated SALT LAKE CITY Utah 84115 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Other. Specify ____ 066 Automobile Is the claim subject to offset? **✓** No Yes 4.20 \$1,400.00 Sprint Last 4 digits of account number _ Nonpriority Creditor's Name P.O. Box 219554 When was the debt incurred? n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Kansas City Missouri 64121 State Zip Code Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Unpaid Bill Other. Specify ___ Is the claim subject to offset? **✓** No Yes US DEP ED 4.21 \$17,000.00 Last 4 digits of account number 0501 Nonpriority Creditor's Name When was the debt incurred? 3/2000 PO BOX 5609 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated GREENVILLE 75403 Texas City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Is the claim subject to offset?

✓ No Yes

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Edmondson Debtor 1 Divida Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.22 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 105081 When was the debt incurred? 3/2000 Number Street As of the date you file, the claim is: Check all that apply. Contingent 30348 Atlanta Georgia Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes 4.23 US DEPT ED \$0.00 Last 4 digits of account number 1862 Nonpriority Creditor's Name PO Box 105081 When was the debt incurred? 3/2000 Number As of the date you file, the claim is: Check all that apply. Contingent Atlanta Georgia 30348 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset?

✓ No Yes Case 18-01965 Doc 1 Filed 01/24/18 Entered 01/24/18 08:59:20 Desc Main Document Page 32 of 72

Debtor 1 Divida		Edmondson	Case number <i>(if known)</i>	
First Nam	е	Middle Name	Last Name	
art 3: List Ot	hers to Be Notified A	About a Debt That	t You Already Listed	I
collection a collection a creditors he	gency is trying to colle gency here. Similarly, i re. If you do not have a	ct from you for a de f you have more tha	bt you owe to someone in one creditor for any o be notified for any de	or a debt that you already listed in Parts 1 or 2. For example, if a e else, list the original creditor in Parts 1 or 2, then list the of the debts that you listed in Parts 1 or 2, list the additional ebts in Parts 1 or 2, do not fill out or submit this page. in Part 1 or Part 2 did you list the original creditor?
Name 111 W JACKSON BLVD S-400			Line 4.9	of (Check Part 1: Creditors with Priority Unsecured Claims
Number	Street		_	one): Part 2: Creditors with Nonpriority Unsecured Claims
CHICAGO	Illinois	60604	Last 4 digits of account number	
City	State	Zip Code		

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Debtor 1 Divida Edmondson Case number (if known)

FIRST Na	me Middle Name Last Name			
Part 4: Add t	ne Amounts for Each Type of Unsecured Claim			
	amounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim.	s for s	tatistical reporting	purpos
			Total claims	
Total claims from Part 1	6a. Domestic support obligations.	6a.	\$0.00	
iioiii r ait i	6b. Taxes and certain other debts you owe the government	6b.	\$0.00	
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.00	
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$0.00	
	amount nere. 6e. Total. Add lines 6a through 6d.	6e.	\$0.00	
	oor rotain rida iiiloo da tiiroagii oai			
			Total claims	
Total claims from Part 2	6f. Student loans	6f.	\$17,000.00	
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00	
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00	
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$39,535.00	
	6i Total Add lines 6f through 6i	6i	\$56,535.00	

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Fill in this information to identify your case:								
Debtor 1	Divida		Edmondson					
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse, if filing)	First Name	Middle Name	Last Name					
United States Bankruptcy Court for the:		Northern	District of Illinois (State)					
Case number (If known)								

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or com	pany with whom you have	the contract or lease	State what the contract or lease is for					
Edmondson, Al Name 401 W. 99th St			Residential Lease, Debtor is Lessee, Yearly Residential Lease					
Number	Street							
Chicago	Illinois	60628						
City	State	Zip Code						

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			Do	cument rage	. 33 01 12
Fill i	n this infor	mation to identify your c	ase:		
Deb	tor 1	Divida		Edmondson	
		First Name	Middle Name	Last Name	
	otor 2				
(Spo	use, if filing)	First Name	Middle Name	Last Name	
Unit	ted States E	ankruptcy Court for the:	Northern	District of Illinois	
Cas	e number			(State)	
(If kno		_			
					Check if this is an
					amended filing
Of	ficial	Form 106H			
	111	- II V O-	1 - 1 - 4		
<u>5c</u>	neaui	e H: Your Coc	leptors		12/15
the e	entries in t vn). Answe	he boxes on the left. At r every question.		to this page. On the to	space is needed, copy the Additional Page, fill it out, and number portion of any Additional Pages, write your name and case number (if a codebtor.)
			lived in a community pro kico, Puerto Rico, Texas, W		? (Community property states and territories include Arizona, California, n.)
		Go to line 3.			
		• •	er spouse, or legal equiva	lent live with you at the t	time?
		No			
		Yes. In which communit	y state or territory did you	ı live?	Fill in the name and current address of that person.
		Name of your spouse, f	ormer spouse, or legal equ	valent	
		Number Street			
		City	State	Zip Co	de
		- 4	2.3.0	<u> </u>	
3.	In Column	1, list all of your codel	otors. Do not include you	spouse as a codebtor	if your spouse is filing with you. List the person shown in line 2

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line a again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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Debtor 1 Divida										
Debtor 2 Spouse, if filing First Name Middle Name Last Name Last Name Check if this is: An amended filing A supplement showing post-petition chapter 13 A supplement showing post-petition showing post-petition showing post-petition showing post-petition showing post-petition showing post-petition s	Fill in this in	formation to identify	your case:							
Debtor 2 Spoose, if filling) First Name Middle Name Last Name United States Bankruptcy Court for the: Case number (I known) Official Form 106 Schedule I: Your Income 12/15 Be as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filling jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filling with you, do not include information about your spouse. If you have more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separated and your spouse is not filling with you, do not include information about additional employers. Occupation Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employer's name Employer's address The Habitat Company LLC State 2tp Code City State 2tp Code City State 2tp Code City State 2tp Code City State 2tp Code	Debtor 1	Divida		Edmoi	ndso	on				
Spouse, if filling First Name		First Name	Middle Name	Last N	ame)	- Che	eck if this is:		
United States Bankruptcy Court for the: Case number (It known) Official Form 106 Schedule I: Your Income 12/15 Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are separated and your spouse is not filing with you, do not include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employees. Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Debtor 1 Debtor 2 Employed Not Employed		First Name	Middle Neme	Loot M	ome		- -	An amended filing		
Official Form 106l Schedule I: Your Income Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, staten a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Debtor 1 Debtor 2 Employed Not Employed City State Zip Code The Habitat Company LLC Street Chicago Illinois 60654 City State Zip Code The years Chicago Illinois 1920 City State Zip Code The years Chicago Illinois 1920 City State Zip Code The years Chicago Illinois 1920 City State Zip Code The years Chicago Illinois 1920 City State Zip Code The years Chicago Illinois 1920 City State Zip Code The years Chicago Illinois 1920 City State Zip Code The years Chicago Illinois 1920 City State Zip Code The years								-	nost-netition chanter 19	
Case number (if known) Official Form 106 Schedule I: Your Income 12/15 Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separate and your spouse is not filing with you, do not include information about your spouse. If nore space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Debtor 1 Employer's name Employer's address The Habitat Company LLC Street The Habitat Company LLC Chicago Illinois 60654 City State Zip Code City State Zip Code City State Zip Code		Bankruptcy Court for	Northern	_						
Official Form 106 Schedule I: Your Income 12/15 Be as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filling jointly, and your spouse is living with you, include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation The Habitat Company LLC Employer's name Employer's name Employer's address The Habitat Company LLC Employer's State Zip Code How long employed there?				(0	olalo	,				
Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employes. Include part time, seasonal, or self-employed work. Occupation Employer's name Employer's name Employer's name Employer's address The Habitat Company LLC S30 W Hubbard # 500 Number Street Chicago Illinois 60654 City State Zip Code City State Zip Code	(If known)							MM / DD / YYYY		
Be as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filling jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filling with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Debtor 1 Debtor 2 Employed Mot Employed Not Employed Cocupation Employer's address The Habitat Company LLC Street Number Street	Official	Form 106I								
responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment Debtor 1 Debtor 2 Debtor 2 Debtor 2 Debtor 3 Debtor 4 Debtor 5 Debtor 6 Debtor 7 Debtor 8 Debtor 9 Deb	Schedu	le I: Your In	come						12/15	
If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employer's address The Habitat Company LLC 350 W Hubbard # 500 Number Street Chicago Illinois 60654 City State Zip Code Tity Planty or State Zip Code Imployed State Zip Code	information a spouse. If mo number (if kr	about your spouse. I ore space is needed nown). Answer ever	f you are separated and , attach a separate she y question.	d your spous	se is	not filing	with you, do	not include informat	ion about your	
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attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employer's address Occupation Employer's name Employer's address Occupation # The Habitat Company LLC Street The Habitat Company LLC Solve Hubbard # 500 Number Street Chicago Illinois 60654 City State Zip Code How long employed there?				Emplo	ved			Fmployed		
employers. Include part time, seasonal, or self-employed work. Occupation The Habitat Company LLC Employer's name Employer's address The Habitat Company LLC 350 W Hubbard # 500 Number Street Chicago Illinois 60654 City State Zip Code How long employed there? The Habitat Company LLC State Zip Code 11 years					-	yed				
Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employer's address The Habitat Company LLC 350 W Hubbard # 500 Number Street Chicago Illinois 60654 City State Zip Code How long employed there? Include part time, seasonal, or self-employer's name Employer's name Employer's address The Habitat Company LLC 350 W Hubbard # 500 Number Street Chicago Illinois 60654 City State Zip Code Illinois 50654 City State Zip Code	information about additional					-				
Self-employed work. Occupation may include student or homemaker, if it applies. Employer's address State Sip Code State Sip Code	, ,		Occupation					_		
Occupation may include student or homemaker, if it applies. Chicago Illinois 60654 City State Zip Code City State Zip Code Lity State Zip Code Lity		self-employed work.			at Co	mpany LLC		_		
or homemaker, if it applies. Chicago Illinois 60654	Occupatio									
City State Zip Code City State Zip Code How long employed there? The state is a state in the state is a state in the state in the state is a state in the state in the state is a state in the state in the state in the state is a state in the state in the state is a state in the state in th				Number Sti	reet			Number Street		
City State Zip Code City State Zip Code How long employed there? The state is a state in the state is a state in the state in the state is a state in the state in the state is a state in the state in the state in the state is a state in the state in the state is a state in the state in th										
City State Zip Code City State Zip Code How long employed there? The state is a state in the state is a state in the state in the state is a state in the state in the state is a state in the state in the state in the state is a state in the state in the state is a state in the state in th								-		
How long employed 11 years there?										
there?				,		State	Zip Code	City	State Zip Code	
				11 years						
Part 2: Give Details About Monthly Income	Part 2: Giv	ve Details About N								
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing	'	,							·	
spouse unless you are separated.	, ,	ũ.		combine the	info	rmation for a	all employers fo	•	s below. If you need	
spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.						For D	Debtor 1	non-filing spouse		
spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or					2.		\$3,166.89		-	
spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would		e and list monthly over	time pay.		3.		+ \$0.00			
spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be.	4. Calcula	te gross income. Add li	ne 2 + line 3.		4.		\$3,166.89		_	

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Debto		dmondson	Case number	(if	
	First Name Middle Name La	ast Name	known) For Debtor 1	For Debtor 2 or non-filing spouse	
Cop	y line 4 here	→ 4.	\$3,166.89		
-	all payroll deductions:				
	Tax, Medicare, and Social Security deductions	5a.	\$372.10		
	Mandatory contributions for retirement plans	5b.	\$0.00		
	Voluntary contributions for retirement plans	5c.	\$0.00		
	Required repayments of retirement fund loans	5d.	\$0.00		
	Insurance	5e.	\$0.00		
	Domestic support obligations	5f.	\$0.00		
	Union dues	5g.	\$157.91		
ŭ	Other deductions. Specify:		\$0.00 +		
	I the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f	·	\$530.01		
7. Cal	culate total monthly take-home pay. Subtract line 6 from line	4. 7. <u> </u>	\$2,636.88		
8. List	all other income regularly received:				
8a.	Net income from rental property and from operating a business, profession, or farm				
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	\$0.00		
8b.	Interest and dividends	8b.	\$0.00		
8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive	1			
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c	\$0.00		
8d.	Unemployment compensation	8d	\$0.00		
8e.	Social Security	8e	\$0.00		
	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies Specify:	04	\$0.00		
8.0	Pension or retirement income	8f. 8a	\$0.00		
•		8g. nd 8h. +	\$0.00 +		
	Other monthly income. Specify: Pro-Rated Income Tax Refun		, , , , , ,		
9. Aud	l all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g +	9.	\$0.00		
	culate monthly income. Add line 7 + line 9. d the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spe	10.	\$2,636.88 +	=	\$2,636.88
Inc frie	ate all other regular contributions to the expenses that you lude contributions from an unmarried partner, members of your hads or relatives.	nousehold, your d	ependents, your roomm		
	not include any amounts already included in lines 2-10 or amou	nts that are not av	allable to pay expenses		. Фоло
Spe	ecify:				+ \$0.00
	ld the amount in the last column of line 10 to the amount in the that amount on the Summary of Schedules and Statistical Sun			•	\$2,636.88
					Combined monthly income
13. D o	you expect an increase or decrease within the year after y No.	ou file this form?			
L	Yes. Explain:				

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		Docu	$\frac{1}{2}$	<u>'</u> -		
Fill in this infor	mation to identify you	r case:				
Debtor 1	Divida		Edmondson			
Debtor 2	First Name	Middle Name	Last Name	Check if this is:		
(Spouse, if filing)	First Name	Middle Name	Last Name	An amended filir	ng	
	Bankruptcy Court for the	e: Northern [District of Illinois (State)		nowing post-petition cl the following date:	napter 13
Case number (If known)				MM / DD / YYYY	,	
Official	Form 106J					
Schedul	e J: Your Ex	penses				12/1
information. If (if known). Ans	more space is needed wer every question.	d, attach another sheet to this	re filing together, both are equall form. On the top of any additiona)r
1. Is this a joi	cribe Your Househ	loid				
	to line 2					
		separate household?				
		separate nousenoiu:				
L	No	file Official Farman 100 LO. Furan	and for Committee Household of Daha	0		
		·	ises for Separate Household of Debt	or 2.		
-	' 브	No				
Do not list L Debtor 2.	Debtor 1 and	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent li with you?	ve
			Child	22 years	No.	
			0.11	40	Yes.	
			Child	19 years	Yes.	
	penses include	No				
than		Yes				
yourself an dependent	a your					
Part 2: Esti	mate Your Ongoing	g Monthly Expenses				
	of a date after the bar		rou are using this form as a suppl plemental Schedule J, check the			
	•	l-cash government assistance I it on Schedule I: Your Income	-		Your ex	penses
	I or home ownership or the ground or lot. 4.	expenses for your residence. In	clude first mortgage payments and		4.	\$600.00
	luded in line 4:					
4a. Real e	state taxes				4a	\$0.00

4b.

4c.

4d.

\$0.00

\$0.00

\$0.00

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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Debtor 1 Divida Edmondson Case number (if known)
First Name Middle Name Last Name

Your ex	spenses \$0.00
6. Utilities: 6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. Gd. Other. Specify: 6d 7. Food and housekeeping supplies 8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 9. Clothing, laundry, and dry cleaning 10. Personal care products and services 11. 12. Transportation. Include gas, maintenance, bus or train fare. Do not include ar payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a	\$0.00
6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. 6d. Other. Specify:	
6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. 6d. Other. Specify: 6d 7. Food and housekeeping supplies 7. 8. Childcare and children's education costs 8. 9. Clothing, laundry, and dry cleaning 9. 10. Personal care products and services 10. 11. Medical and dental expenses 11. 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a	
6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: 6d 7. Food and housekeeping supplies 7. 8. Childcare and children's education costs 8. 9. Clothing, laundry, and dry cleaning 9. 10. Personal care products and services 10. 11. Medical and dental expenses 11. 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance. Specify: 15d. Other insurance. Specify: 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1	\$326.00
6d. Other. Specify: 6d 7. Food and housekeeping supplies 7. 8. Childcare and children's education costs 8. 9. Clothing, laundry, and dry cleaning 9. 10. Personal care products and services 10. 11. Medical and dental expenses 11. 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. 14. Charitable contributions and religious donations 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b 15c. Vehicle insurance 15c 15d. Other insurance. Specify: 15d 15d. Other insurance. Specify: 15d 17a. Car payments for Vehicle 1	\$0.00
7. Food and housekeeping supplies 7. 8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 9. 10. Personal care products and services 11. Medical and dental expenses 11. 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Other insurance. Specify: 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. To the spayments for Vehicle 1 17a. Car payments for Vehicle 1	\$260.00
8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 10. Personal care products and services 11. Medical and dental expenses 11. 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. 14. Charitable contributions and religious donations 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Other insurance. Specify: 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. Thistallment or lease payments: 17a. Car payments for Vehicle 1	\$0.00
9. Clothing, laundry, and dry cleaning 9. 10. Personal care products and services 10. 11. Medical and dental expenses 11. 22. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance. Specify: 15d. Other insurance. Specify: 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a	\$500.00
10. Personal care products and services 11. Medical and dental expenses 11. 1. 1. 2. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Other insurance. Specify: 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a	\$0.00
11. Medical and dental expenses 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17a. Car payments for Vehicle 1 17a	\$110.00
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17a. Car payments for Vehicle 1 17a.	\$150.00
Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a	\$10.00
14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance. Specify: 15d. Other insurance. Specify: 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a	\$375.00
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a 15b. Health insurance 15c 15c. Vehicle insurance 15d 15d 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a	\$0.00
Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Other include taxes deducted from your pay or included in lines 4 or 20. Specify: 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a.	\$0.00
15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Other insurance. Specify: 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a	
15c. Vehicle insurance 15c 15d. Other insurance. Specify: 15d 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a	\$0.00
15d. Other insurance. Specify: 15d 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a	\$0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a	\$105.00
Specify:	\$0.00
17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a	
17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a	\$0.00
17b. Car payments for Vehicle 2	\$0.00
	\$0.00
17c. Other. Specify: 17c	\$0.00
17d. Other. Specify: 17d	\$0.00
18. Your payments of alimony, maintenance, and support that you did not report as deducted from	\$0.00
your pay on line 5, Schedule I, Your Income (Official Form 106I).	
19. Other payments you make to support others who do not live with you. Specify: 19.	#0.00
Specify:	\$0.00
20a. Mortgages on other property 20a	\$0.00
20b. Real estate taxes.	\$0.00
20c. Property, homeowner's, or renter's insurance	\$0.00
20d. Maintenance, repair, and upkeep expenses.	\$0.00
20e. Homeowner's association or condominium dues	\$0.00

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Debtor 1 Divida			Edmondson	Case number (if known)		
First N	lame	Middle Name	Last Name			
21. Other. Spe	cify:				21	\$0.00
	your monthly expense	es.				\$2,436.00
	nes 4 through 21.					\$0.00
, ,	` , , ,	**	from Official Form 106J-2			\$2,436.00
22c. Add lir	ie 22a and 22b. The res	sult is your monthly exp	enses.		22.	
23. Calculate	your monthly net inco	me.				
23a. Copy	ine 12 (your combined	monthly income) from S	Schedule I.		23a	\$2,636.88
23b. Copy	your monthly expenses	from line 22 above.			23b	\$2,436.00
		ses from your monthly ir	icome.			\$200.88
The re	sult is your monthly ne	t income.			23c	
			oan within the year or do you nodification to the terms of y			

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	,		
Debtor 1	Divida		Edmondson
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court for the:	Northern	District of Illinois
			(State)
Case number			
(If known)			

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	t 1: Sign Below							
	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?							
	No No							
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).						
	Under penalty of perjury, I declare that I have read the summary a that they are true and correct.	and schedules filed with this declaration and						
×	·	×						
	Signature of Debtor 1	Signature of Debtor 2						
	Date 1/24/2018	Date						
	MM/DD/YYYY	MM/DD/YYYY						

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Fill ir	n this in	formation to identify	your cas	se:						
Debt	tor 1	Divida First Name		Middle	Name	Edmonds Last Nam		-		
Debt (Spot	tor 2 use, if filing	g) First Name		Middle	Name	Last Nam	e	-		
Unite	ed State	es Bankruptcy Court	for the:	Northern	[District of Illino		_		
Case (If kno	e numbe	er				(State	e) 	-		
Of	ficia	ıl Form 10	7							Check if this is a amended filing
		ent of Fina		Affairs f	or Indiv	viduals l	Filina fa	r Bankru	ıptcv	04/1
Be a	s comp matior	olete and accurate	as poss needed	sible. If two m , attach a sep	arried peop	le are filing t	ogether, bo	th are equally	responsible for s	supplying correct your name and case
Part	1: Gi	ive Details About	Your M	arital Status	and Where	e You Lived	Before			
1.	What	is your current ma	rital stati	us?						
		Married Not married								
2.	Durin	g the last 3 years,	have you	lived anywher	e other than	where you liv	e now?			
	Ľ.	No Yes. List all of the pl	aces you	lived in the las	t 3 years. Do	o not include v	vhere you live	now.		
	C	Debtor 1:			Dates Del there	btor 1 lived	Debtor 2:			Dates Debtor 2 lived there
							Same a	as Debtor 1		Same as Debtor 1
	<u> </u>	Number Street			From		Number St	reet		From
	7	City Sta	te	Zip Code			City	State	Zip Code	
							Same a	as Debtor 1		Same as Debtor 1
	<u></u>	Number Street			From		Number St	reet		From To
	7	City Sta	te	Zip Code			City	State	Zip Code	
3.	and ten	ritories include Arizon	a, Califorr	nia, Idaho, Louis	siana, Nevada	, New Mexico,	Puerto Rico, T			ommunity property states

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Debtor	1 Divida	Edmone		number (if known)	
	First Name Middle	e Name Last Nar	me		
Part 2:	Explain the Sources of Your Inc	come			
Fil	d you have any income from employm I in the total amount of income you receive tivities. If you are filing a joint case and you No Yes. Fill in the details.	ved from all jobs and all busi	nesses, including part-time		ars?
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:	Wages, commissions, bonuses, tips Operating a business	\$2840.65	Wages, commissions, bonuses, tips Operating a business	
	For last calendar year: (January 1 to December 31, 2017) YYYY	Wages, commissions, bonuses, tips Operating a business	\$39776.34	Wages, commissions, bonuses, tips Operating a business	
	For the calendar year before that: January 1 to December 31, 2016) YYYY	Wages, commissions, bonuses, tips Operating a business	\$37000.00	Wages, commissions, bonuses, tips Operating a business	
Inc pul filin	d you receive any other income during clude income regardless of whether that in blic benefit payments; pensions; rental in a g a joint case and you have income that t each source and the gross income from No Yes. Fill in the details.	ncome is taxable. Examples of come; interest; dividends; m you received together, list it	of other income are alimony; oney collected from lawsuits only once under Debtor 1.	s; royalties; and gambling and lot	
		Debtor 1		Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:				
	For last calendar year: (January 1 to December 31, 2017) YYYY				
	For the calendar year before that: (January 1 to December 31, 2016) YYYY				

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Edmondson Debtor 1 Divida Case number (if known) Middle Name First Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors

Other

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tor 1	Divida			Lai	mondson	Case number	III KHOWII)
	First Name		Middle Name	Las	st Name		
nsi corp age	ders include your rela porations of which yo	atives; any ou are an c a busines:	general partners officer, director, p s you operate as	; relatives of any person in control,	general partners; parti or owner of 20% or	nerships of which y more of their voting	who was an insider? ou are a general partner; g securities; and any managing domestic support obligations,
<u>.</u>	No						
╡	Yes. List all payme	ents to an	insider.				
	, ,			Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name						
	Number Street						
	City St	ate	Zip Code				
	Insider's Name						
	Number Street						
	City St	ate	Zip Code				
	der? ude payments on de No	bts guaran	nteed or cosigne	d by an insider.			
	res. List all payme	nts that b	enefited an insi	Dates of	Total amount	Amount you still owe	Reason for this payment
	res. List all payme	ents that b	enefited an insi		Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
	Insider's Name	ents that b	enefited an insi	Dates of		-	
		ents that b	enefited an insi	Dates of		-	
	Insider's Name Number Street	ents that b	enefited an insi	Dates of		-	
	Insider's Name Number Street			Dates of		-	
	Insider's Name Number Street City St			Dates of		-	
_	Insider's Name Number Street City St Insider's Name Number Street			Dates of		-	

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Debtor 1 Divida Edmondson Case number (if known) Middle Name First Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No **V** Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property \$0 US DEP ED Creditor's Name Explain what happened PO BOX 5609 Number Street Property was repossessed. Property was foreclosed. **GREENVILLE** 75403 Texas Property was garnished. State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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Deb	otor 1 <u>Divida</u>		Edmondson	Case number (if known)		
	First Name Mi	iddle Name	Last Name			
11.	Within 90 days before you filed for b accounts or refuse to make a payme			ank or financial institution,	set off any amou	nts from your
	✓ No ☐ Yes. Fill in the details.					
	_		Describe the action the	creditor took	Date action was taken	Amount
	Creditor's Name					
	Number Street		Last 4 digits of account r	uumhar VVVV		
			Last 4 digits of account r	iumber. XXX-		
	City State	Zip Code				
12.	Within 1 year before you filed for bar appointed receiver, a custodian, or a		of your property in the p	possession of an assignee fo	or the benefit of c	creditors, a court-
	✓ No ☐ Yes					
Pari	t 5: List Certain Gifts and Contril	butions				
13.	Within 2 years before you filed for b		ou give any gifts with a to	otal value of more than \$600) per person?	
	✓ No		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	Yes. Fill in the details for each g	gift.				
	Gifts with a total value of more per person	than \$600	Describe the gifts		Dates you gave the gifts	Value
	Person to Whom You Gave the Gi	ift				
	Number Street					
	City State Person's relationship to you	Zip Code				
	Person to Whom You Gave the Gi	ift				
	Number Street					
	City State Person's relationship to you	Zip Code				

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ebtor 1	Divida	Edmond	son Case number (if kn	own)	
	First Name Middle N	Name Last Nam		· /	
. Wit	thin 2 years before you filed for bankr	uptcy, did you give any gif	ts or contributions with a total value	of more than \$600	to any charity?
		,		·	•
✓	No				
	Yes. Fill in the details for each gift or	contribution.			
	-		b.1	D.1.	W.L.
	Gifts or contributions to charities	Describe W	hat you contributed	Date you	Value
	that total more than \$600			contributed	
	Charity's Name				
	•				
	Noveles Object				
	Number Street				
	Cit. Ctata 7ia	Cada			
	City State Zip	Code			
	List Contain Lances				
ιo:	List Certain Losses				
	Yes. Fill in the details. Describe the property you lost and how the loss occurred	Include the	ny insurance coverage for the loss amount that insurance has paid. List	Date of your loss	Value of property lost
		pending insi A/B: Propert	urance claims on line 33 of <i>Schedule</i>		
		AB. Hopert	<i>y.</i>		
	List Certain Payments or Transf				
abo	thin 1 year before you filed for bankru out seeking bankruptcy or preparing a lude any attorneys, bankruptcy petition p	ptcy, did you or anyone el a bankruptcy petition?			anyone you consulte
abo		ptcy, did you or anyone el a bankruptcy petition?			anyone you consulte
abo	out seeking bankruptcy or preparing a lude any attorneys, bankruptcy petition p	ptcy, did you or anyone el a bankruptcy petition?			anyone you consulte
abo	out seeking bankruptcy or preparing a lude any attorneys, bankruptcy petition p No	ptcy, did you or anyone el a bankruptcy petition? rreparers, or credit counselin	g agencies for services required in your	bankruptcy.	
abo	out seeking bankruptcy or preparing a lude any attorneys, bankruptcy petition p No	ptcy, did you or anyone el a bankruptcy petition? preparers, or credit counselin Description		bankruptcy. Date payment	Amount of
abo	out seeking bankruptcy or preparing a lude any attorneys, bankruptcy petition p No	ptcy, did you or anyone el a bankruptcy petition? rreparers, or credit counselin	g agencies for services required in your	bankruptcy. Date payment or transfer	
abo	out seeking bankruptcy or preparing a lude any attorneys, bankruptcy petition p No Yes. Fill in the details.	ptcy, did you or anyone el a bankruptcy petition? preparers, or credit counselin Description transferred	g agencies for services required in your and value of any property	Date payment or transfer was made	Amount of payment
abo	out seeking bankruptcy or preparing a lude any attorneys, bankruptcy petition p No Yes. Fill in the details. Semrad Law Firm	ptcy, did you or anyone el a bankruptcy petition? preparers, or credit counselin Description	g agencies for services required in your and value of any property	bankruptcy. Date payment or transfer	Amount of
abo	but seeking bankruptcy or preparing a lude any attorneys, bankruptcy petition position positi	ptcy, did you or anyone el a bankruptcy petition? preparers, or credit counselin Description transferred	g agencies for services required in your and value of any property	Date payment or transfer was made	Amount of payment
abo	but seeking bankruptcy or preparing a lude any attorneys, bankruptcy petition position position. No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue	ptcy, did you or anyone el a bankruptcy petition? preparers, or credit counselin Description transferred	g agencies for services required in your and value of any property	Date payment or transfer was made	Amount of payment
abo	but seeking bankruptcy or preparing a lude any attorneys, bankruptcy petition position positi	ptcy, did you or anyone el a bankruptcy petition? preparers, or credit counselin Description transferred	g agencies for services required in your and value of any property	Date payment or transfer was made	Amount of payment
abo	but seeking bankruptcy or preparing a lude any attorneys, bankruptcy petition position position. No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue	ptcy, did you or anyone el a bankruptcy petition? preparers, or credit counselin Description transferred	g agencies for services required in your and value of any property	Date payment or transfer was made	Amount of payment
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abo	Semrad Law Firm Person Who Was Paid City State Zip Email or website address Person Who Made the Payment, if Not Person Who Was Paid	ptcy, did you or anyone el a bankruptcy petition? preparers, or credit counselin Description transferred Attorney's Fe	g agencies for services required in your and value of any property	Date payment or transfer was made	Amount of payment
abo	Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 606 City State Zip Email or website address Person Who Made the Payment, if Not	ptcy, did you or anyone el a bankruptcy petition? preparers, or credit counselin Description transferred Attorney's Fe	g agencies for services required in your and value of any property	Date payment or transfer was made	Amount of payment
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abo	Semrad Law Firm Person Who Was Paid City State Zip Email or website address Person Who Made the Payment, if Not Person Who Was Paid	ptcy, did you or anyone el a bankruptcy petition? preparers, or credit counselin Description transferred Attorney's Fe	g agencies for services required in your and value of any property	Date payment or transfer was made	Amount of payment
abo	Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 600 City State Zip Email or website address Person Who Made the Payment, if Not Person Who Was Paid Number Street	ptcy, did you or anyone el a bankruptcy petition? preparers, or credit counselin Description transferred Attorney's Fe	g agencies for services required in your and value of any property	Date payment or transfer was made	Amount of payment
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abo	Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 600 City State Zip Email or website address Person Who Made the Payment, if Not Person Who Was Paid Number Street	ptcy, did you or anyone el a bankruptcy petition? preparers, or credit counselin Description transferred Attorney's Fe	g agencies for services required in your and value of any property	Date payment or transfer was made	Amount of payment

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Debtor	1 Divida		Edmondson	Case number (if know	vn)	
	First Name	Middle Name	Last Name	<u> </u>		
he	elp you deal with your cree o not include any payment o	ditors or to make paym		ir behalf pay or transf	er any property to a	anyone who promised to
	Yes. Fill in the details.					
			Description and value of an transferred	y property	Date payment or transfer was made	Amount of payment
	Person Who Was Paid		-			
	Number Street		-			
	City State	Zip Code	- -			
	J., Olale	<u> </u>				
	No Yes. Fill in the details.		Description and value of protransferred		iny property or received or debts p	Date transfer was made
	Person Who Received Tr	ansfer	-	III OXOIIUI		
	Number Street		-			
	City State Person's relationship to y	•	-			
	Person Who Received Tr	ansfer	-			
	Number Street		- _			
	City State Person's relationship to y	•	-			
be	ithin 10 years before you teneficiary? hese are often called asset-p		d you transfer any property to a	self-settled trust or si	milar device of wh	ich you are a
<u>~</u>	No Yes. Fill in the details.					
L	1 700. Fill it the details.		Description and value of the	ne property transferre	d	Date transfer was made
	Name of trust					

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Debtor 1 Divida Edmondson _ Case number (if known) Middle Name First Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was before number instrument closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Street Number City State Zip Code

City

State

Zip Code

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Debtor 1 Divida Edmondson __ Case number (if known) Middle Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code City State Zip Code Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

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Deb	tor 1				Edm	nondson	Cas	se number <i>(ii</i>	fknown) _		
		First Name		Middle Name	Last	Name					
26.	Hav	e you been a part	y in any judic	ial or administr	ative procee	ding under	any environme	ntal law? In	clude settler	ments and ord	ers.
		No Yes. Fill in the det	ails.								
					Court or age	ncy		Nature o	of the case		Status of the case
		Case title									Pending
					Court Name NumberStreet	:					On appeal
		Case number					7'- 0-1-				Concluded
Pari	t 11:	Give Details Al	out Vour B		City	State	Zip Code				
						-		following	onnoctions t	o any husinos	-2
21.	Witi		etor or self-e	mployed in a tra	ade, professio	on, or other	activity, either	_		o any busines	s:
		A member of A partner in a		ility company (L	.LC) or limited	d liability pa	ırtnership (LLP)				
		An officer, di	rector, or ma	naging executiv	-						
		_		f the voting or e		es of a corp	ooration				
		No. None of the a Yes. Check all tha				for each b	ousiness.				
					Descri	be the natu	ire of the busine	ess			number Do not number or ITIN.
		Business Name			_				EIN:		
		Number Street			— <u> </u>	-6			Dates busi	ness existed	
		City	State	Zip Code	- Name	or account	ant or bookkeep	ber	From	То	
					Descri	be the natu	ire of the busine	ess			number Do not number or ITIN.
		Business Name			_				EIN:		
		Number Street			— Name	of accounts	ant or bookkee;	ner	Dates busi	ness existed	
		City	State	Zip Code	_				From	To	
					Descri	be the natu	ire of the busine	ess			number Do not number or ITIN.
		Business Name			_				EIN:		
		Number Street			— Name	of accounts	ant or bookkeep	ner	Dates busi	ness existed	
		City	State	Zip Code	_	4000uill	O. DOORROO		From	To	

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Deb	tor 1	Divida			Edmondson	Case number (if known)
	F	First Name		Middle Name	Last Name	
28.	cred	nin 2 years before litors, or other par No Yes. Fill in the det	rties.	bankruptcy, did yo	u give a financial statemei	nt to anyone about your business? Include all financial institutions,
					Date issued	
		Name			MM/DD/YYYY	
		Name to a Charact			=	
		Number Street				
		City	State	Zip Code	=	
		Oity	Olato	Zip Gode		
Part	12:	Sign Below				
t	true a	nd correct. I unde kruptcy case can	erstand that result in fine	making a false states s up to \$250,000, o	tement, concealing proper	nts, and I declare under penalty of perjury that the answers are ty, or obtaining money or property by fraud in connection with 0 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
		/\$/ I	Divida Edmorure of Debtor			Signature of Debtor 2
		Oignate	are or bestor			Date
		Date 1	/24/2018			Date
	Did vo	ou attach addition	al pages to	our Statement of	Financial Affairs for Individ	uals Filing for Bankruptcy (Official Form 107)?
			a. pages to			autorining to Duminapro, (Cinotal Form to .).
l l	✓ No	0				
	Ye	es				
ı	Did yo	ou pay or agree to	pay someon	e who is not an att	orney to help you fill out b	ankruptcy forms?
ı	. No	0				
	_	es. Name of person	1			Attach the Bankruptcy Petition Preparer's Notice,
L	⊔ ''	30. Name of person	•			Declaration, and Signature (Official Form 119).

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

		Northe	rn District of Illinois						
re_	Divida Edmondson			Case No.					
	Debtor			Ol I	(If known)				
				Chapter	Chapter 13				
	DISCLOSURE OF	COMPENS	SATION OF AT	TORNEY F	OR DEBTOR				
1	. Pursuant to 11 U.S.C. § 329(a) and F compensation paid to me within one rendered or to be rendered on behalf	year before the fil	ng of the petition in bankr	uptcy, or agreed to	o be paid to me, for services				
	For legal services, I have agreed to ac	cept			\$4,000.00				
	Prior to the filing of this statement I h	ave received			\$275.00				
	Balance Due				\$3,725.00				
2	. The source of the compensation paid	to me was:							
	✓ Debtor	Othe	er (specify)						
3	. The source of the compensation paid	to me is:							
	✓ Debtor	Othe	er (specify)						
4	4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.								
I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.									
5	In return for the above-disclosed fee, a. Analysis of the debtor's finan bankruptcy;	_	-	•					
	b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;								
	c. Representation of the debtor	c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;							
	d. Representation of the debtor	in adversary proce	eedings and other conteste	ed bankruptcy mat	ters;				
6	. By agreement with the debtor(s), the	above-disclosed f	ee does not include the fol	lowing services:					
			CERTIFICATION						
	certify that the foregoing is a complet tor(s) in this bankruptcy proceedings.	e statement of an	/ agreement or arrangemen	it for payment to r	me for representation of the				
	1/24/2018		/s/ A	licia Haro					
	Date		Signatu	re of Attorney					
			Semra	nd Law Firm					
			Name	of law firm					

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$275	total fee
+	\$75	administrative fee
	\$200	filing fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to:
http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit
20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Edmondson, Divida	Case No	Case No			
	Debtor(s)	Chapter.	Chapter13			
	VERIFIC	CATION OF CREDITOR MAT	TRIX			
Ti knowledge	he above named Debtors hereby verify e.	that the attached list of creditors is to	rue and correct to the best of their			
Date:	1/24/2018	/s/ Edmondson Edmondson, Di Signature of De	ivida			

PRESTIGE FINANCIAL SVC 1420 S 500 W SALT LAKE CITY, UT, 84115

ACCEPTANCE NOW 6288 Dawson Blvd Norcross, GA, 30093

CREDIT MANAGEMENT LP PO Box 118288 Carrollton, TX, 75011

FIRST PREMIER BANK c/o Jefferson Capital Systems LLC PO Box 7999 c/o Linda Dold Saint Cloud, MN, 56302

MONTEREY COL 4095 AVENIDA DE LA OCEANSIDE, CA, 92056

CCS/CORTRUST BANK NA PO BOX 7030 MITCHELL, SD, 57301

CAPITALONE c/o Pollack & Rosen, P.C 1825 Barrett Lakes Blvd Suite 510 Kennesaw, GA, 30144

ASHRO 3650 Milwaukee St Madison, WI, 53714

US DEPT ED PO Box 105081 Atlanta, GA, 30348

FEDLOAN POB 60610 HARRISBURG, PA, 17106

US DEP ED PO Box 8937 Madison, WI, 53708

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IRS Po Box 7346 Philadelphia, PA, 19101

City of Chicago - Parking and red Light Tickets 121 N. LaSalle Street Chicago, IL, 60602

HARRIS & HARRIS LTD 222 Merchandise Mart Plaza, Suite 1900 Chicago, IL, 60654

Fox Hills Cash PO Box 196 Batesland, SD, 57716

Freedom Cash Lenders Po Box 637 Lakeport, CA, 95453

MyQuickWallet P.O, Box 1146 Mission, SD, 57555

ASPEN P.O. BOX 105374 ATLANTA, GA, 30348

Cash USA 3183 Wilshire Blvd. #196-A23 Los Angeles, CA, 90010

Illinois Masonic 836 W Wellington Chicago, IL, 60657

Sprint P O Box 629023 El Dorado Hills, CA, 95762

AT&T 2001 York Rd Oak Brook, IL, 60523 Case 18-01965 Doc 1 Filed 01/24/18 Entered 01/24/18 08:59:20 Desc Main Document Page 62 of 72

Citibank PO BOX 6241 Sioux Falls, SD, 57117

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.



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- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to \$726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.



D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

 Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services.

 However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney.* If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.



F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$371.76
- 3. Before signing this agreement, the attorney has received, \$275.00 toward the flat fee, leaving a balance due of \$3,725.00; and \$61.76 for expenses, leaving a balance due of \$4,096.76
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Debtor(s	s)	Attorney for Debtor(s)	
		/s/Alicia Haro allen Haro	>
/s/ Divid	da Edmondson William John John	$\bigcap \bigcap $	
Signed:			
Date:	1/23/2018		

Do not sign if the fee amounts at top of this page are blank.

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Debtor 1 Divida		imondson Case n	umber (if known)		
First Name		stivanie			
Part 6: Answer These Qui 16. What kind of debts do you have?	No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily b	orimarily for a personal, famil pusiness debts? Business de vestment or through the ope	y, or household purpose." ebts are debts that you incurred tration of the business or investm	o obtain	
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	expenses are paid that fur		vexempt property is excluded and a e to unsecured creditors?	administrative	
18. How many creditors do you estimate that you owe?	☑ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,000	25,001-50,000 50,001-100,00 More than 100	00	
19. How much do you estimate your assets to be worth?		\$1,000,001-\$10 mi \$10,000,001-\$50 n \$50,000,001-\$100 \$100,000,001-\$50	million	1-\$10 billion 01-\$50 billion	
^{20.} How much do you estimate your liabilities to be?		\$1,000,001-\$10 mi \$10,000,001-\$50 m \$50,000,001-\$100 \$100,000,001-\$500	million	1-\$10 billion 01-\$50 billion	
Part 7: Sign Below					
For you		apter 7, I am aware that I may understand the relief availab · I did not pay or agree to pay ed and read the notice requir	proceed, if eligible, under Chapt le under each chapter, and I choo someone who is not an attorney ed by 11 U.S.C. § 342(b).	er 7, 11,12, or 13 se to proceed to help me fill	
	out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.				
	/s/ Divida Edmondson W Signature of Debtor 1	enida Johnondoog	Signature of Debtor 2		
	Executed on 1/23/2018 MM / DD /		Executed onMM / DD / YYYY		

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Fill in this infor	mation to identify your c	ase:					
Debtor 1	Divida First Name	Middle Name	Edmondson Last Name	_			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	_			
United States E	Bankruptcy Court for the:	Northern	District of Illinois (State)	_			
Case number (If known)							
Official	Form 106De	<u>.c</u>	AMANASA A		Check if this is an amended filing		
Declarat	ion About an	Individual Deb	tor's Schedules		12/15		
money or prop	erty by fraud in connect 1341, 1519, and 3571.			ing a false statement, concealing prop 50,000, or imprisonment for up to 20 y			
Did you p	ay or agree to pay some	one who is NOT an attor	ney to help you fill out bankru	ptcy forms?			
Yes. I	Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).						
Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.							
🗶 /s/ Divida	a Edmondson	unda Colmusai	box x				

Signature of Debtor 2

MM/DD/YYYY

Signature of Debtor 1

MM/DD/YYYY

Date 1/23/2018

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Debtor	1 Divida First Name	Mic	idle Name	Edmondson Last Name	Case number (if known)
	LIL2! IAGILIE	WIIC	rule Name	Last name	$ \\ \text{ 1} \\ \text{ 2} \\ \text{ 2} \\ \text{ 2} \\ \text{ 2} \\ \text{ 3} \\ \text{ 2} \\ \text{ 3} \\ \text$
		before you filed for ba ther parties.	nkruptcy, did y	ou give a financial staten	nent to anyone about your business? Include all financial institutions,
D	7 No				
Ē	Yes. Fill in	the details below.			
***************************************				Date issued	
	Name			MM/DD/YYYY	<u>-</u>
	Number	Street			
	City	State	Zip Code		
Part 12	Sign Bel	ow			
a ba	inkruptcy ca	se can result in fines u /s/ Divida Edmonds	10.	or imprisonment for up to	o 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
		Signature of Debtor 1	on a tem	DO TO NOTE	Signature of Debtor 2
		Date 1/23/2018			Date
Did y	you attach a	dditional pages to You	r Statement o	f Financial Affairs for Indiv	riduals Filing for Bankruptcy (Official Form 107)?
IJ	No				
Ď	Yes				
Did y	you pay or a	gree to pay someone w	ho is not an a	ttorney to help you fill out	bankruptcy forms?
[V]	No				
靣	Yes. Name o	f person			Attach the Bankruptcy Petition Preparer's Notice,

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Debtor(s)	Case No	Case No		
		Chapter.	Chapter13		
	VERIF	ICATION OF CREDITOR MATR	IX		
TI knowledge		rify that the attached list of creditors is true	and correct to the best of their		
Date:	1/23/2018	/s/ Edmondson, Div Edmondson, Divida Signature of Debtor	MULLIANDE GOITH NOV-O		

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Debt	or 1 Divida First Name	Middle Name	Edmondson Last Name	Case number (ff known)				
16.	Calculate the median fam	ily income that applies to y	ou. Follow these steps:	AND AND AND A TOWARD WARRANCE WHEN A STATE WAS A THE HOME WAS A TOWARD TO A TOWARD A TOWARD AND	10000000000000000000000000000000000000			
	16a. Fill in the state in which		Illinois					
	16b. Fill in the number of pe	•	3					
	•	y income for your state and si			\$78,559.00			
	household	y income for your state and si	The part of the pa	ist of applicable median income amounts, go online				
			or this form. This list may	also be available at the bankruptcy clerk's office.				
17.	How do the lines compare							
	17a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Disposable Income (Official Form 122C-2).							
	U.S.C. § 1325(b)(Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above.						
Part	3: Calculate Your Con	nmitment Period Under	11 U.S.C. §1325(b)(4)					
18.	Copy your total average m	onthly income from line 11.			\$3,283.50			
19.				ot filing with you, and you contend that calculating the spouse's income, copy the amount from line 13.	•			
	19a. If the marital adjustmen	nt does not apply, fill in 0 on li	ne 19a.		-\$0.00			
	19b. Subtract line 19a from	n line 18.			\$3,283.50			
20.	Calculate your current mo	nthly income for the year. F	ollow these steps:					
	20a. Copy line 19b.				\$3,283.50			
	Multiply by 12 (the nur	nber of months in a year).			x 12			
	20b. The result is your curre	nt monthly income for the yea	r for this part of the form.		\$39,402.00			
	20c. Copy the median family	vincome for your state and size	ze of household from line	16c	\$78,559.00			
21.	How do the lines compare	?						
	Line 20b is less than line commitment period is 3		ed by the court, on the top	o of page 1 of this form, check box 3, The				
		r equal to line 20c. Unless oth iod is 5 years. Go to Part 4.	erwise ordered by the cou	irt, on the top of page 1 of this form, check box				
Part	: Sign Below							
	By signing here, I declar	e under penalty of perjury that	the information on this st	atement and in any attachments is true and correct.				
	🗶 /s/ Divida Edmon	idson Williads Joh	word x					
	Signature of Debtor		- KOKO	nature of Debtor 2				
	Date 1/23/2018 MM/DD/YYY	,	Date	· · · · · · · · · · · · · · · · · · ·				
	IVIIVI/UU/TTT	l		MM/DD/YYYY				
•		NOT fill out or file Form 122C- ut Form 122C-2 and file it wit		that form, copy your current monthly income from lin	e 14			